

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusitiess Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





12/02/05--01021--022 **78.75



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FILED SECRETARY OF STATE TALLAHASSEF, FLORIDA

05 DEC -2 PM 4: 32

·· ·- <u>-</u> - ·			
Fonerty Ho	use Condominium		, en
Association.) _C .		-
CICO <u>WWW. COURT II</u>	11 24		
		<u>-</u>	
		Art of Inc. File	* # \$ *
		LTD Partnership File	te s
		Foreign Corp. File	<u></u>
		L.C. File	
		Fictitious Name File	_
		Trade/Service Mark	-
		Merger File	
		Art. of Amend. File	
		RA Resignation	
		Dissolution / Withdrawal	<u> </u>
		Annual Report / Reinstatement	
		Cert. Copy	
		Photo Copy	
		Certificate of Good Standing	
		Certificate of Status	.5
		Certificate of Fictitious Name	
		Corp Record Search	
		Officer Search	
		Fictitious Search	
Signature		Fictitious Owner Search	٠,
3		Vehicle Search	-
<u> </u>		Driving Record	, -
Requested by:	10/10/10 10:01	UCC 1 or 3 File	
Name		UCC 11 Search	
		UCC 11 Retrieval	
Walk-In	Will Pick Un	Courier	

ARTICLES OF INCORPORATION 05 DEC -2 PM 4: 32

OF

FOGERTY HOUSE CONDOMINIUM ASSOCIATION, INC.

The undersigned, for the purpose of forming a not for profit corporation under Chapter 617, Florida Statutes, does hereby adopt the following Articles of Incorporation:

ARTICLE I: NAME

The name of the corporation is **FOGERTY HOUSE CONDOMINIUM ASSOCIATION**, **INC.**

ARTICLE II: PRINCIPAL OFFICE

The principal place of business and mailing address of the corporation is 2503 Fogerty St., Key West, FL 33040.

ARTICLE III: PURPOSE

The sole purpose of the corporation is to manage the affairs of the condominium.

ARTICLE IV: QUALIFICATION

The qualifications for members and the manner of their admission are stated in the bylaws of the corporation.

ARTICLE V: INITIAL REGISTERED OFFICE AND AGENT

The initial registered office and agent of the corporation is Robin Smith Martin, 424 Fleming St., Key West, FL 33040.

ARTICLE VI: INITIAL BOARD OF DIRECTORS

The manner in which the directors are elected is stated in the corporate bylaws. The names and addresses of the initial board of directors are Robin Smith Martin, Bethany Smith Martin, Don Kidd, 424 Fleming St., Key West, FL 33040.

ARTICLE VII: NON-STOCK BASIS

The corporation is organized under a non-stock basis.

ARTICLE VIII: DISSOLUTION

In the event of dissolution, the residual assets of the corporation will be turned over to one or more organizations which themselves are exempt organizations described in sections 501(c) (3) and 170 (c) (2) of the Internal Revenue Code of 1954 or corresponding sections of any prior or future law, or to the Federal, State or local government for exclusive public purpose.

ARTICLE IX: INCORPORATOR

The name and address of the incorporator of these Articles of Incorporation is Capital Connection, Inc., 417 East Virginia Street, Suite 1, Tallahassee, Florida 32301.

ARTICLE X: AMENDMENTS

The corporation reserves the right to amend or repeal any provisions of these Articles of Incorporation, or any amendment(s) thereto.

ARTICLE XI: CORPORATE POWERS

The corporate powers of this corporation are as provided in section 617.0302, Florida Statutes.

The undersigned incorporator has executed these Articles of Incorporation this 2nd day of December 2005.

"Capital Connection, Inc. by Stacey Piland, Client Representative"

05 DEC -2 PM 4: 32

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the mentioned corporation, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The nam	e of the corporation	on is: <u>F06F</u>	RTY	HOUSE		
CON	100MINIU	M ASSOC	CATI	ON, IN	16.	
2. The nam	ne and street addre	ess of the registe	ered agent	and office is	:	
	RoBin	y SMITH	MAR.	TIN		
	424	FLEMI	N6 5	Γ		
	KF	Y WEST	FL	33040		

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

x Tal Lufi